

**CLAIMS ONLY**

Application Number

Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments					
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	
1	/							61		/		
2		/						62		/		
3		/						63		/		
4		/						64		/		
5		/						65		/		
6		/						66		/		
7		/						67		/		
8		/						68		/		
9		/						69		/		
10	/							70		/		
11		/						71		/		
12	/							72		/		
13		/						73		/		
14		/						74		/		
15		/						75		/		
16	/							76		/		
17		/						77		/		
18		/						78		/		
19	/							79		/		
20	/							80		/		
21		/						81		/		
22		/						82		/		
23		/						83		/		
24		/						84		/		
25		/						85		/		
26		/						86		/		
27		/						87		/		
28		/						88		/		
29		/						89		/		
30		/						90		/		
31		/						91		/		
32	/							92		/		
33		/						93		/		
34		/						94		/		
35		/						95		/		
36		/						96		/		
37		/						97		/		
38		/						98		/		
39		/						99		/		
40		/						100		/		
41		/										
42		/										
43		/										
44		/										
45		/										
46		/										
47		/										
48		/										
49	/											
50		/										
Total Indep								Total Indep	8			
Total Depend								Total Depend	56			
Total Claims								Total Claims	64			